

REMARKS

The Applicant respectfully requests that claims 1-33 be canceled and that new claims 34-50 be entered and examined for the present application.

In the event that a fee required for the filing of this document is missing or insufficient, the undersigned attorney hereby authorizes the Commissioner to charge payment of any fees associated with this communication or to credit any overpayment to Deposit Account No. **18-0987**. If a withdrawal is required from Deposit Account No. **18-0987**, the undersigned Attorney respectfully requests that the Commissioner of Patents and Trademarks cite Attorney Docket Number **BBD.P0022** for billing purposes.

Respectfully submitted,



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Attorney Docket No. BBD.P0022